



2003
Consumer's
Guide
Medicare (M+C)
Managed Care
in Missouri



Choosing a Managed Care Health Plan

Choosing a managed care plan can be complex and difficult. This 2003 Consumer's Guide helps you compare the quality of health care and member satisfaction among the commercial managed care plans in Missouri. Use this guide along with any coverage information your employer provides to help select the right plan for you or your family.

Follow these steps to assist you in choosing a health plan:

- ◆ Use the comparison indicators in this brochure only in combination. No one indicator is a sole direct measure of a health plan's performance.
- ◆ Talk to your doctor, family and friends about their experiences with different plans.
- ◆ Come up with your own questions and call your plan choices for answers using the phone numbers provided.
- ◆ Draw on all information to evaluate your managed care options. Make the choice that best suits your needs.

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What Do Managed Care Plans Look Like?

Plan Name	Statewide Market Rating† 2002	National Accreditation Rating†
Advantra	14%	URAC
Coventry HealthCare Advantra	10%	URAC
Humana Gold	9%	URAC
Medicare Complete	34%	JCAHO
Mercy Premier Plus	13%	none
St. John's Premier Plus Springfield	13%	none
†This is a company-wide measure Data Source: Missouri Department of Insurance		
Performance Ratings ● High ● Average ○ Low		

This shows the percentage of the State's managed care M+C plan members who are enrolled with a specific plan. It provides an indication not only of plan size but also of the plan's ability to meet the varied health care needs of its members.

Missouri managed care plans may voluntarily seek and qualify for accreditation, indicating that they meet national quality standards from the following organizations: National Committee for Quality Assurance (NCQA), Utilization Review Accreditation Commission (URAC) and Joint Commission on Accreditation of Healthcare Organizations (JCAHO).

Medicare (M+C) Managed Care Plan Performance

Plan	Women's Health		
	Mammograms	Women's Cancer: Breast(B), Cervical (C)	
		Case Management	Educational Materials
Advantra		BC	BC
Coventry HealthCare Advantra		BC	BC
Humana Gold		BC	BC
Medicare Complete		BC	BC
Mercy Premier Plus		none	C
St. John's Premier Plus Springfield		none	BC
Statewide Averages	76%		

This table compares health plans' performance on Women's Health Care to the statewide average, using the rating symbols below. The table also reports on which plans offer selected benefits and coverages.

Quality of Care Ratings*

- High
 - ◐—Average
 - Low/Needs Improvement
 - NA Numbers too small
 - NR Not reported by plan
- *Plan performance measures are compared to statewide averages

Women (ages 52-69) in plan who had a mammogram (breast x-ray) in the past 2 years.

Plan offers case management and educational materials for breast and cervical cancer.

Note: Letter indicates the conditions for which services are offered.

All female Medicare beneficiaries are covered for one annual mammogram and for a Pap smear, pelvic exam, and clinical breast exam at least once every three years.

Case Management helps patients, providers and physicians coordinate the medical care needed for complex or chronic illnesses.

Medicare (M+C) Managed Care Plan Performance

Plan	Cardiovascular		
	Controlling High Blood Pressure	Stroke (S), Congestive Heart Failure (H), High Blood Pressure (B) Case Management	Cholesterol Management after Acute Cardiovascular Event
Advantira	●	SHB	●
Coventry HealthCare Advantira	●	SHB	●
Humana Gold	●	SHB	●
Medicare Complete	○	SHB	●
Mercy Premier Plus	○	SH	●
St. John's Premier Plus Springfield	○	SH	●
Statewide Averages	54%		75%

This table compares health plans' performance on Cardiovascular Health to the statewide average, using the rating symbols below. The table also reports on which plans offer selected benefits and coverages.

Plan assesses if blood pressure was controlled among members who have been diagnosed with hypertension.

Plan offers case management for stroke, congestive heart failure and high blood pressure.
Note: Letter indicates the conditions for which services are offered.

Plan provides cholesterol management following an acute cardiovascular event like a heart attack.

Quality of Care Ratings*

- High
- Average
- Low/Needs Improvement

NA Numbers too small

NR Not reported by plan

*Plan performance measures are compared to statewide averages

Screenings help to determine if a patient is at risk for a certain disease or health problem.

Case Management helps patients, providers and physicians coordinate the medical care needed for complex or chronic illnesses.

Medicare (M+C) Managed Care Plan Performance

Plan	Diabetes		
	Diabetic Kidney Disease	Diabetic Retinal Eye Exam	Diabetic Blood Testing
Advantra	●	●	●
Coventry HealthCare Advantra	●	○	●
Humana Gold	●	●	●
Medicare Complete	○	●	○
Mercy Premier Plus	○	●	●
St. John's Premier Plus Springfield	○	●	●
Statewide Averages	41%	63%	87%

This table compares health plans' performance on Diabetes management to the statewide average, using the rating symbols below. The table also reports on which plans offer selected benefits and coverages.

Plan members who received screening for kidney disease (nephropathy).

Plan members who received a retinal eye exam during the past year.

Plan members (ages 18-75) who received a blood glucose test during the past year.

Diabetes that occurs later in life may be prevented by keeping your weight down, exercising, and eating a healthy diet. Pills can often now control diabetes without the need for insulin shots.

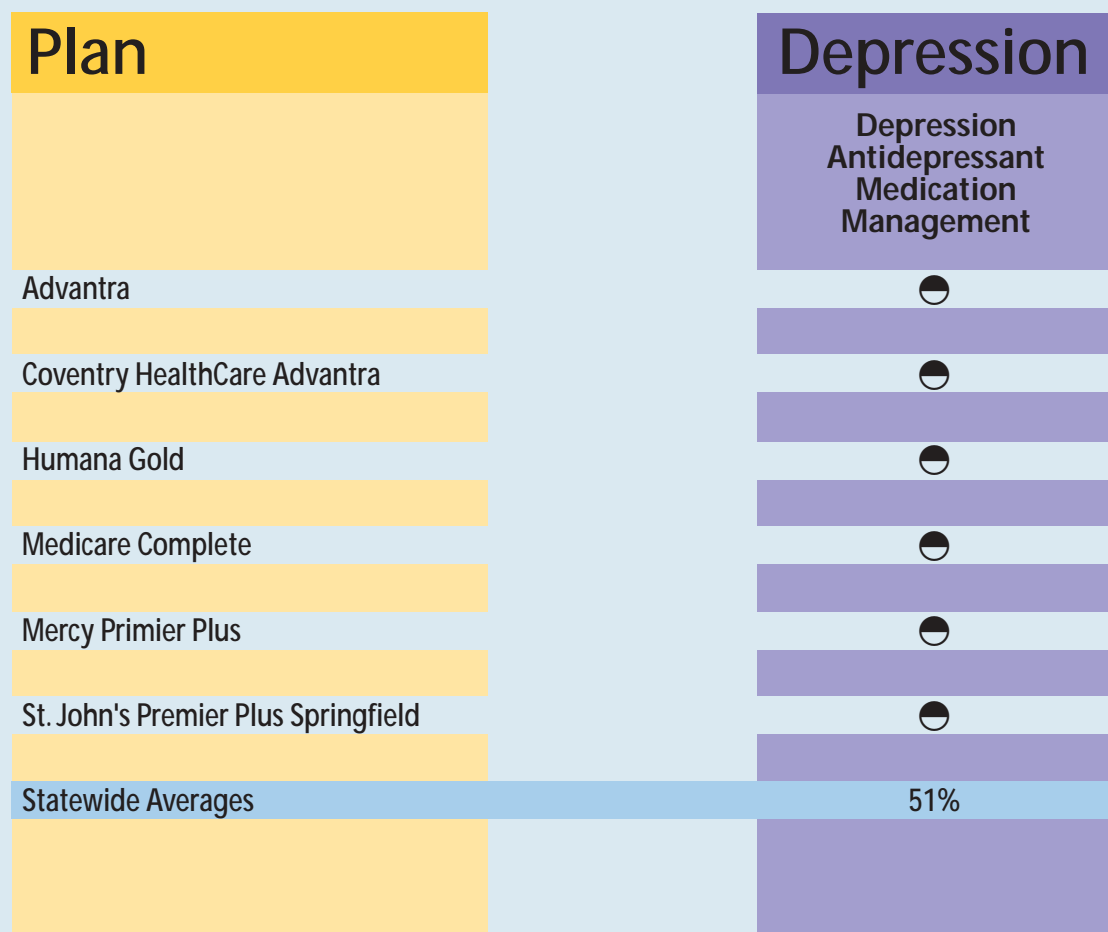
Quality of Care Ratings*

- High
- Average
- Low/Needs Improvement
- NA Numbers too small
- NR Not reported by plan
- *Plan performance measures are compared to statewide averages

Screenings help to determine if a patient is at risk for a certain disease or health problem.

Case Management helps patients, providers and physicians coordinate the medical care needed for complex or chronic illnesses.

Medicare (M+C) Managed Care Plan Performance



This table compares health plans' performance on Depression management to the statewide average, using the rating symbols below. The table also reports on which plans offer selected benefits and coverages.

Plan members whose medicine for recovery from depression is adequately managed.

Quality of Care Ratings*

- High
 - Average
 - Low/Needs Improvement
 - NA Numbers too small
 - NR Not reported by plan
- *Plan performance measures are compared to statewide averages

Screenings help to determine if a patient is at risk for a certain disease or health problem.

Case Management helps patients, providers and physicians coordinate the medical care needed for complex or chronic illnesses.

Medicare (M+C) Managed Care Plan Performance

Plan	Member Satisfaction						
	Customer Service	Getting Care Quickly	Getting Needed Care	Rating of Doctor Seen Most Often	Rating of Specialist Seen Most Often	Overall Rating of Health Care	Overall Rating of Plan
	(1)	(2)	(3)	(4)	(5)	(6)	(7)
Coventry Health Care of Kansas	○	●	◐	◐	○	○	○
United Healthcare-Midwest	◐	◐	○	◐	◐	◐	○
Humana Health Plan	◐	○	◐	○	○	○	○
Group Health Plan	○	●	●	●	●	●	○
Mercy Health Plans of MO*	●	●	●	●	●	●	●
Statewide Averages	69%	57%	83%	46%	48%	46%	35%
*Mercy Premier Plus & Springfield Premier Plus combined Data Source: Center for Medicare & Medicaid Services							

Response Descriptions for Satisfaction Categories Above

- (1) No problem with paperwork, written materials or help from customer service.
- (2) No problem getting necessary care in a reasonable time.
- (3) No problem getting good doctors and nurses, referrals, and necessary care.
- (4) Overall rating of personal doctor seen most often.
- (5) Overall rating of specialist seen most often.
- (6) Overall rating of health care.
- (7) Overall rating of health plan.

All Plans Averages and Quality of Care
Symbols Explained on following page.

Quality of Care Ratings*

- High
 - ◐—Average
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- *Plan performance measures are compared to statewide averages

Screenings help to determine if a patient is at risk for a certain disease or health problem.

Case Management helps patients, providers and physicians coordinate the medical care needed for complex or chronic illnesses.

All Plans Averages and Quality of Care Symbols Explained

The numbers on the "All Plans Averages" line show the percent of plan members that received the care or were satisfied with the care shown in the header at the top of that column. For example, under the "Getting Care Quickly" column, 57% (or 57 out of every 100 members) is the average number of members who received care when needed - of all Medicare plans. So, here, an Average (●) for a specific plan means that the plan scored close to the All Plans Average of 57%. A High (●) or Low (○) symbol in any column means the plan scored well above or well below the column average for All Plans.

Member Services Telephone Numbers

Managed Care Plan	Customer Service	RN Helpline	Website
Advantra	800-533-0367		http://www.ghp.com
Coventry Healthcare Advantra	800-727-9712	800-622-9528	
	800-207-1262		http://www.chckc.cvty.com
Humana Gold	800-448-6262	800-941-5388	http://www.humana.com
Medicare Complete	800-656-0065	877-365-7950	http://www.uhc.com
Mercy Premier Plus	800-481-4466	800-909-Team	http://www.mercyhealthplans.com
St. John's Premier Plus	800-481-4466	800-909-Team	http://www.mercyhealthplans.com

Websites

The following Websites may be useful:

Agency for Healthcare Research & Quality:

<http://www.ahrq.gov>

American Accreditation Healthcare Commission/URAC:

<http://www.urac.org>

American Association of Health Plans:

<http://www.aahp.org>

American Medical Association:

<http://www.ama-assn.org>

American Osteopathic Association:

<http://www.aoa-net.org>

Families USA:

<http://www.familiesusa.org>

Joint Commission on Accreditation of Healthcare Organizations/JCAHO:

<http://www.jcaho.org>

Missouri Department of Health and Senior Services

<http://www.dhss.state.mo.us>

Missouri Department of Insurance

<http://www.insurance.state.mo.us>

National Committee for Quality Assurance/NCQA:

<http://www.ncqa.org>

National Health Information Center

<http://www.health.gov/nhic>

The Official U.S. Government Site for People with Medicare

<http://www.medicare.gov>

U.S. Health and Human Services-Health Finder:

<http://www.healthfinder.gov>

For further information about this Consumer's Guide, contact:

**Bureau of Health Care
Performance Monitoring,
Missouri Department of
Health and Senior Services
P.O. Box 570
Jefferson City, MO
65102-0570
(573) 526-2812**

Concerns or Complaints?

Call your managed care plan if you have concerns on your treatment or feel you have been denied health services. They will explain your grievance rights and how to file a complaint. If you disagree with a plan's position or decision, you can file a complaint with the Missouri Patient Care Review Foundation Beneficiaries Helpline at: 1-800-347-1016

The Missouri Department of Health and Senior Services has attempted to publish accurate information based upon common definitions. The data reported in this brochure are based on plan performance during 2002. Managed care plans were given an opportunity to review and correct the data presented. Other corrections or suggestions should be forwarded to the Center for Health Information Management and Evaluation, Missouri Department of Health and Senior Services, PO Box 570, Jefferson City, MO 65102. Our telephone number is (573) 526-2812. A companion technical report, containing the data and statistical formulas used, is also available for \$10.

The Missouri Department of Health and Senior Services is an equal opportunity/affirmative action employer. Services are provided on a nondiscriminatory basis. This information is available in alternate formats to citizens with disabilities.

